## State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03/06/08	Address:	4753 W. CR 400 S.
Case #:	<u>16F17904</u>		Kokomo, Indiana 46901
County:	Howard/34		
Type of Laboratory Seizure (check one)  Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Seizure Location (c Residence Outbuilding Vehicle	check all that apply)  Hotel/Motel  Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)  Lithium/Ammonia Reaction(s):  Red Phosphorous/Iodine Reaction(s):  Flammable Solvents: garbage  Water Reactive Metal (Lithium): garbage  Anhydrous Ammonia:  Hydrochloric Acid Gas Generator(s): garbage  Corrosive Acid: garbage  Corrosive Base:  Other (item and location):			
Child under age 18 discovered       (check one)       Investigative Information         ☐ Yes on/a (number present)       ☐ Ephedrinc/Pseudoephedrine Tracking Log         ☐ No       ☐ Retail/Merchant Tip         *If yes, fax report to Child Protective Services       ☐ Other: Howard Co. Shf. Dept         This report is to be faxed to the following agencies that serve the location:         Fire Department: KFD       Fax: 765-456-7580         Wealth Department: Howard Co.       Fax: 765-456-2292			
	artment: Howard Co. ction Service: N/A	Fax: N/A	<u> </u>
For further information regarding this methaniphetamine laboratory, contact Investigating Officer: R.A. Burgess Phone 765-473-6666			

<sup>\*\*</sup> This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department. listed within 24 hours of scene processing.

<sup>\*\*\*</sup> This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention,